PTO/SB/17 (10-08)
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Under the Paperwork Reduction Ac	respond to a collection of information unless it displays a valid OMB control number							
Effective on 12/	Complete if Known							
Fees pursuant to the Consolidated Appr			10/565,843-Conf. #7762					
FEE TRANSMITTAL					January 26, 2006			
For FY 2009					Takayuki YANAGISAWA			
	Examiner Name N		M. A. Golub					
Applicant claims small entity status. See 37 CFR 1.27			7 tt Offic		2828			
TOTAL AMOUNT OF PAYMENT (\$) 810.00			Attorney Docket No. 1		1163-0548PUS1			
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
X Deposit Account Deposit Accou	Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
X Charge any additional fee(s) or underpayments of X Credit any overpayments								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FEES		ARCH FEES	EXAMIN	IATION FEES			
	Small Entity		Small Entity		Small Entity			
Application Type Fee		Fee (\$		Fee (\$)	Fee (\$)	Fees P	aid (\$)	
Utility 33		540	270	220	110			
Design 22		100	50	140	70			
Plant 22	0 110	330	165	170	85			
Reissue 33	0 165	540	270	650	325			
Provisional 22	0 110	0	0	0	0			
2. EXCESS CLAIM FEES							Small Entity	
Fee (\$) Fee (\$)								
Each claim over 20 (including Rei				52	26			
Each independent claim over 3 (in				220	110			
Multiple dependent claims				390	195			
Total Claims Extra Clai	ms Fee (\$)	F6	ee Paid (\$)	M	<u>ultiple Depende</u>	ent Claims		
20 - 20 or HP	x =			Fee	<u>e (\$)</u> <u>F</u>	ee Paid (\$)	}	
HP = highest number of total claims paid for, if greater than 20.							_	
			e Paid (\$)					
3 -3 or HP =	x =							
HP = highest number of independent clair	ns paid for, it greater tha	in 3.						
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer								
listings under 37 CFR 1.52(e)	the application size	or paper i	e is \$270 (\$135 f	onically III or emall en	ea sequence or (computer		
sheets or fraction thereof. See				or sman ch	inty) for cach ac	iditional 50		
Total Sheets Extra She			dditional 50 or frac	tion thereof	Fee (\$)	Fee P	aid (\$ <u>)</u>	
- 100 =			(round up to a who					
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00								
SUBMITTED BY								
Signature 11:	Am. #58	3.75	Registration No.	40,439	Telephone	(703) 205	-8035	
Name (Print/Type D. Richard Anderson						Date November 24, 2008		
Name (Fine 1949 89-D. NICHAID AND	213011				Date N	overriber 2	24, 2000	